

PART B - FEE(S) TRANSMITTAL

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27581 7590 04/07/2004

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JOEL D. NICKEL (Depositor's name)
Joel D. Nickel (Signature)
January 6, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/713,598	11/15/2000	George Mamo	P-9580.00	3041

TITLE OF INVENTION: MINIMALLY INVASIVE METHOD FOR IMPLANTING A SACRAL STIMULATION LEAD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	07/07/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
MATTHEWS, WILLIAM H	3738	128-898000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Thomas F. Woods
Kerth M. Campbell
Stephen W. Bauer

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Minneapolis, MN USA

Please check the appropriate assignee category or categories (will not be printed on the patent):

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4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies _____

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Anna M. J. J.

(Date)

1/6/05

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